UNITED
NATIONS

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Economic and Social Council

Distr.
LIMITED

E/ICEF/1997/P/L.7
25 October 1996

ORIGINAL: ENGLISH

FOR INFORMATION

UNITED NATIONS CHILDREN'S FUND
Executive Board
First regular session 1997
20-24 January 1997
Item 3 of the provisional agenda*

COUNTRY NOTE**

Lao People's Democratic Republic

SUMMARY

The Executive Director presents the country note for the Lao People's Democratic Republic for a programme of cooperation for the period 1998 to 2002.

THE SITUATION OF CHILDREN AND WOMEN

1. The Lao People's Democratic Republic has experienced steady economic growth since the early 1990s and has a per capita gross national product of $320. The population of 4.5 million is comprised of 50 ethnic groups who speak five major languages. Almost one half of the people still live in poverty and are unable to meet their basic needs. Gender, ethnic and regional disparities are increasing due to rapid socio-economic changes. The Government is trying to increase basic services by improving both service delivery and monitoring systems.

2. The Government has adopted the goals of the World Summit for Children through a national programme of action (NPA), which is being introduced into the national planning system. The Government has ratified the Convention on the Rights of the Child and submitted its first report to the Committee on the Rights of the Child. The National Commission for Mothers and Children (NCMC) plays a strategic coordinating role in monitoring implementation of the Convention and the NPA.

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* E/ICEF/1997/2.

** An addendum to the present report containing the final country programme recommendation will be submitted to the Executive Board for approval at its third regular session of 1997.

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3. There has been progress regarding child survival rights. Over the last five years, the infant mortality rate (IMR) has declined from 125 to 113 per 1,000 live births and the under-five mortality rate (U5MR) from 182 to 142 per 1,000 live births, due partly to higher immunization coverage. There has been a decline in vitamin A deficiency and the country has achieved universal salt iodization. Breast-feeding is almost universal, but early or late complementary feeding is widespread. Malaria, acute respiratory infections (ARI), diarrhoeal diseases, anaemia, stunting and wasting still threaten child survival. The maternal mortality rate (MMR) is high at approximately 653 per 100,000 live births.

4. There has been slower progress with regard to child development rights. The gender gap in education leaves girls and ethnic minorities with the fewest opportunities. The female literacy rate is 42 per cent versus 64 per cent for men. Fewer girls than boys complete secondary education. Weak social services do not adequately address the new risks facing youth, e.g., exploitative labour, commercial sexual exploitation, HIV/AIDS and substance abuse.

LESSONS LEARNED FROM PAST COOPERATION

5. Programme implementation was continually assessed and modified to: (a) focus more sharply on key priorities, e.g., sustainable achievement of universal child immunization; and (b) use limited resources more effectively, e.g., through the zonal outreach strategy for immunization which is also helping to reduce vitamin A deficiency and promote oral rehydration therapy, the treatment of ARI and malaria prevention.

6. The strategic mix comprises capacity-building at all levels of Government, including mass organizations, the development of effective implementation and monitoring processes, and increasing the role of communities in decision-making and resource mobilization. For example, a tripartite management system for immunization involving the Government, mass organizations and local communities helped to overcome logistical constraints, weak institutional capacity and unskilled human resources, and also stimulated greater community demand. In addition, cooperation with the Joint United Nations Programme on HIV/AIDS is supporting efforts to prevent HIV/AIDS among at-risk youth through the development of new policies and capacity-building for government ministries and mass organizations, including women's and youth unions and the Lao Red Cross.

7. Reaching communities more effectively with key advocacy messages and information on such issues as universal salt iodization and immunization was made more effective through partnerships with mass organizations, provincial governments and district authorities.

8. The Government has improved child-centred policies as a result of a combination of advocacy by UNICEF and its participation in, and contributions to, regional ministerial and other consultations on goals, juvenile justice and the Convention on the Rights of the Child. These approaches will continue, especially with regard to emerging child protection issues.

PROPOSED COUNTRY PROGRAMME STRATEGY

9. The proposed strategy is based on the government priority of implementing the Convention on the Rights of the Child and the NPA; its commitment to the Convention on the Elimination of all Forms of Discrimination against Women; and the rural and human resource development priorities reflected in the United

Nations country strategy note. The Government's goals for children to which the country programme will contribute include: (a) the reduction of IMR, U5MR, MMR, related morbidity and malnutrition; (b) increased primary school enrolment and completion rates, especially for girls and ethnic minority communities; (c) improved programmes for early childhood development, non-formal education and life skills covering, inter alia, HIV/AIDS and substance abuse prevention; (d) gender equality for girls and women; (e) protection of children, e.g., from unexploded land-mines, trafficking and commercial sexual exploitation; and (f) the development of national and local capacities concerning laws and policy, services and monitoring. The objectives of the country programme of cooperation are to strengthen the quality and sustainability of existing services; extend coverage in selected high-risk communities and areas of the country; and promote implementation, monitoring and community awareness of child rights.

10. The main strategies include strengthening the delivery of basic services by building on effective existing mechanisms. One example is the tripartite management approach, with a greater focus on the sustainability of basic services and reaching underserved children. Sustaining high levels of service coverage will depend partly on the Government's undertaking policy modifications and acquiring higher skill levels in planning, management, technical aspects and monitoring. Stronger community participation activities will capitalize on viable traditions of self-reliance, helping to empower families to use existing services and undertake more effective self-help activities. Greater advocacy, assistance in the development of policies and technical help will be required for transborder and other emerging issues related to rapid socio-economic development, e.g., exploitative child labour, trafficking and HIV/AIDS. Advocacy at the central level will, in turn, help to develop policies and programmes at provincial and district levels, particularly for issues highlighted by the Committee on the Rights of the Child. UNICEF will continue to develop programme partnerships with key bilateral donors and National Committees for UNICEF.

11. The country programme will comprise four programmes. The advocacy, protection and monitoring programme will, firstly, strengthen the capacity of such institutions as NCMC for rights-based advocacy, national and local resource mobilization, the promotion of effective community participation and monitoring implementation of the Convention on the Rights of the Child and the sustainable achievement of NPA goals. Underlying causes such as gender inequality and attitudinal and behaviourial practices, including those related to HIV/AIDS, that hinder progress in general for child rights require priority attention. This will require improved monitoring and data analysis by strengthening the partnership of NCMC with the National Statistics Centre, State Planning Committee and line ministries. New partnerships for greater mobilization and community-based education will be formed with such mass organizations as the National Front and the Youth Union. Commitments agreed to at international conferences will provide programmatic frameworks.

12. The objective of the health and nutrition programme will be to contribute to the reduction of IMR, U5MR and MMR. One overall strategy will be to strengthen integration of services and expand access and usage, building on past achievements. For example, there will be expanded integration of immunization with other health services, in addition to improved quality of existing services and strengthened cooperation with the programmes of other agencies, e.g., with the United Nations Population Fund in the provision of reproductive health services. The other strategy will be to identify new opportunities for service

delivery and community-based activities for problems not addressed by existing systems. For example, UNICEF will build on the experience being gained from an innovative project on safe motherhood and community health funded by the Government of Sweden, and from an anti-malaria project supported by the Government of Japan, both of which combine health service delivery with strong community participation and education to reduce maternal mortality. Micronutrient deficiencies will be reduced through supplementation, improved dietary intake, continued promotion of breast-feeding, appropriate complementary feeding, improved child care and behaviourial practices, and by involving village chiefs, local women and community leaders. For the reduction of both maternal mortality and protein-energy malnutrition, community-level interventions, the convergence of services and national policy development will be priority actions.

13. In line with the new national sector strategy being developed collaboratively, the water and environmental sanitation programme objective is to strengthen policy and technical capacities to expand coverage to more difficult areas. The existing technology package and previously successful community participation methods will be refined and adapted to address gender, public health, school, environmental and personal hygiene aspects. Increased collaboration will be fostered with non-governmental organizations, other United Nations agencies such as the United Nations Development Programme, bilateral donors and the private sector.

14. The objective of basic education programme is to continue to expand access and coverage, especially for the girl child, and improve the quality of community- and family-based early childhood education and primary education, especially for rural and ethnic minority children. Capacity-building will focus on training of underqualified teachers, improved school management and pedagogical support through networks of clustered schools. Community-based, non-formal education will be expanded to reach out-of-school and semi-literate youth, especially girls and women from ethnic minorities. The quality of curricula for formal and non-formal education will be strengthened with topics on hygiene education, including HIV/AIDS prevention. Linkages across both these levels and types of education services will be strengthened to maximize results.

15. The UNICEF programme management will extend successes both to achieve wider coverage and better address emerging children's issues. The country team and UNICEF regional resources will help to mobilize government and donor resources, manage effective implementation and maintain momentum and continuity of advocacy and programme efforts. Supplementary funding will be used to extend coverage and develop new programmatic approaches to child survival, development and protection.

16. The estimated budget for general resources of $5,265,000 for the five-year period 1998-2002 will be allocated by programme on the basis of an ongoing dialogue with the Government of the Lao People's Democratic Republic. Based on interest by donors and past experience, supplementary funding of up to $19,500,000 will be sought for the programme.